



H.E.F. CANADA QUARTERLY

The Human Ecology Foundation of Canada

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CONTENTS

EDITORIAL — <i>Don't Forget the Children</i>	1
H.E.F. CANADA — <i>Highlights of the Annual Meeting</i>	4
SCHOOL — <i>Diet and Hyperactivity</i>	7
FOOD COLOURING — <i>What it Can Do to Your Child</i>	9
LEARNING DISABILITIES — <i>Can Polluted Air Affect Our Children?</i>	11
NEW BOOKS	14
1. H.E.L.P. FOR HYPERACTIVES by Wanda Wilson	14
2. INVISIBLE ADDITIVES by Linda Pim	14
NEWS BRIEFS	16
1. BIRTH DEFECTS HIGH IN HOLLAND MARSH FARMING AREA	16
2. CHEMICALS IN THE WORKPLACE MAY HARM CHILDREN	16
3. EFFECTS OF STEROIDS ON LEARNING IN CHILDREN	16
ANNOUNCEMENTS	17
1. NATIONAL H.E.F. EXECUTIVE	17
2. CLINICAL ECOLOGY INFORMATION BANK NOW POSSIBLE	17
3. ALEXANDER P. SCHAUSS — <i>Special Lecture</i>	17
4. CLEAN PLACES TO LIVE STILL NEEDED	18
5. HEALTHY HORIZONS NEWSLETTER	18
PERSONAL	19
1. JEFFREY GORDON COLLUM — <i>In Memoriam</i>	19
2. AN ECOLOGICAL APARTMENT IN HAWAII	19
3. GOOD HEALTH NATURALLY by Andrew T. Fisher	19
4. ECOLOGICAL SEWING SERVICE	20
5. ITEMS FOR SALE	20
COMICS	21
PUBLICATION AND MEMBERSHIP FORM	22

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The H.E.F. Canada Quarterly

The H.E.F. Canada Quarterly is a publication of The Human Ecology Foundation of Canada, a charitable organization under Canadian law, operating on a non-profit basis. The *Quarterly* is for people who are interested in health and its relation to our environment. It deals primarily with research in the field of *clinical ecology*, and also describes how people have improved their health by changes in habits, diet and environment. As such, it does *not* offer medical advice, and we urge persons wishing to experiment with changes in their lifestyle to do so with the help and guidance of a knowledgeable physician.

The Human Ecology Foundation of Canada

One of the purposes of the Human Ecology Foundation is to promote the free exchange of information on the prevention and treatment of ecological illness. People who are ecologically ill are no longer able to adapt well to common exposures in their everyday environment. They may develop a variety of chronic or acute symptoms that are brought on by substances in the air, in food, or in water.

Natural inhalants such as pollens, dust and moulds, and even natural foods may begin to affect people adversely. This aspect of the condition is often referred to as allergy. But the many synthetic chemicals that are now common around us can also cause symptoms, and overexposure to these can trigger ecological illness even in those with no history of allergy or other sensitivity to the environment. Symptoms may be mild and merely annoying, or they may become severe enough to interfere with a person's daily activities, family life and career.

On a local basis, HEF Branches work toward finding sources of chemically less-contaminated food, water, clothing and household furnishings, as well as providing counselling on changes of lifestyle that may alleviate symptoms. The Foundation and all its Branches would like to encourage others to become involved not only in research on the effects of environment on health, but in working toward a healthier, less-polluted environment.

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This is your latest *Quarterly* issue, in more ways than one. We apologize for the long delay following the *Winter 1981* issue. Various circumstances have combined to throw the editorial office into chaos this year.

We would like to think that the Canadian postal strike in early summer was the primary cause, but this is no longer an easy excuse. For a while it looked like financial difficulties would stop publication, but these have been resolved, through an overall membership fee increase from \$10 to \$15, and some timely loans from some of the HEF Branches to the Headquarters office. Although we do not like to combine *Quarterly* issues, this present issue represents both your *Spring* and *Summer* copies. The savings will allow HEF Headquarters to stay out of the red in 1981.

The final bottlenecks, we admit, turn out to be the undersigned, your editors. We are pleased to say, though, that it was not illness, but rather the lack of it, that has kept us away from the editing desk. The last six months have been busier than we have ever seen them. Business commitments, as well as keeping our 'Sunnyhill' project on the rails, have had to take top priority.

As demand for the services of the Human Ecology Foundation increases, we need more help. The *Quarterly* office desperately needs an assistant editor as well as a reporter. With a little help, we think the *Fall* issue may come out on schedule.

Children Are Our Future

In this issue, we have concentrated again on *children*.

If you ever are inclined to forget why human ecology is important, just look at your children or those of others close to you. These young people are the hope of the future, and if they are going to be able to cope with the challenges that we have bequeathed them, they will need every ounce of health and capability they can muster.

Yet this latest generation of young people may have the cards stacked against them. Many doctors are reporting that allergic problems are on the increase among children. We know that hyperactivity is a common problem. And learning disabilities are being recognized more and more.

What can we do about it? Perhaps among all the people and groups that can do something about it, we are the most fortunate. We have information at our disposal that if properly used could help countless children. Food, inhalant, and chemical sensitivities are widespread, yet not often recognized. They can cause all manner of physical symptoms, and can produce personality and behaviour problems, hyperactivity, and learning disabilities.

Most of our members and certainly our medical advisers realize that often seemingly minor physical changes can mean the difference between misery and success for a child. Just avoiding a few specific foods, such as milk, can often make a world of difference and rid a child of physical discomforts that may have been present on and off since birth. Even minor changes in environment may enable a hyperactive child to enjoy being calm, or to experience the thrill of normal active learning.

But why is this type of information so slow to be accepted? Much of it has been known for decades. Yet thousands of parents, teachers, and doctors either know nothing about it or prefer not to listen.

An Organized Conspiracy?

When something this important is not common knowledge, there are usually strong forces at work. But from our experience it is rarely an organized conspiracy - the world is too complicated a place for that to happen any more. Many different forces have combined in the past to make the facts about allergy, and about food and chemical sensitivities, hard to accept and use in everyday life. Now we are finding that as many of the forces begin to reverse, people

are starting to listen, and want to find out about this exciting field.

Let's consider a few examples. For a long while even the idea that foods and environmental chemicals could affect people was treated by many as nonsense. Many of us didn't even know there were trace chemicals in our foods, our water, and our air. When someone suggested the idea, it felt foreign and uncomfortable.

The more people hear an idea, the more real it becomes to them. Gradually over the last thirty-five years people began to hear about chemical contamination, and cancer risk, and health problems being caused by seemingly innocent things such as cigarettes. Food additives were introduced and banned in succession, indicating that something was going on. Even television commercials began to admit that some foods could make us 'edgy, and out of sorts'.

After a while, information that didn't fit before started to fit easily. As we used to see the world, reacting to foods and chemicals appeared bizarre. Now it is not so crazy - we are seeing more people admit that it happens.

In these early stages when more and more people start to understand that there may be some kind of problem, it seems only natural that we all should resist coming to the conclusion that something may be very wrong. For after all, if a significant number of children are having their minds and their lives impaired by what is in their food, then indeed something is *exceedingly* wrong. Only when we look back ten years from now will we be able to understand how much we have underestimated the magnitude of the problem.

We have talked in previous issues about the popularity of psychology — how somehow we have all been sold on explaining everything away with psychological reasons. Is it easier to think that your child or your pupil really does want to get even with you, deep down, than to consider that his or her behaviour could be aggravated by some allergy? How

long will we cling to these unproven beliefs, before we begin to think and experiment for ourselves?

What about the doctors? Should it not have been their responsibility to bring out the facts? Are they the problem? Some, perhaps. But we are finding that others are surprisingly receptive, because they do indeed want to help children become healthy. Many are ignorant of food and chemical susceptibility not by choice, but because the information is cut off at the source. There has been resistance among editors of medical journals to publish the latest information in the field of clinical ecology. If it is not published widely, how are doctors to know about it?

If anything, we should look at the pressures on the doctors. The drug industry in western society has tremendous resources to influence everyone. We are all far more likely to see ads on our televisions which claim that drugs will solve our medical problems, than we are to see ads explaining how to live healthy lifestyles and eat clean food. The doctors are exposed to this continually in their morning mail and in their journals. Maybe they get used to the idea after a while.

Surely the teachers are part of the problem, then? But medical diagnosis has never been a big part of teacher training. That was supposed to be the doctor's job. If hyperactivity was a medical problem it would have been solved by the child's doctor. If the teachers aren't hearing about it from the doctors and the parents, how are they to know?

We have in fact been pleasantly surprised at how eager many teachers are now to learn about food and chemical sensitivity. Even knowing *why* their 'problem kids' seem to go crazy after snacks is a relief to them. There are some teachers, of course, who still think it is all nonsense. A serious word or two from the medical profession, though, could go a long way towards changing that.

We even know of cases, as many of our readers will, where the teachers *do* recognize ecological illness,

but cannot inspire a child's parents to look seriously into doing anything about it. For in the end, despite anything anyone would like to claim to the contrary, it is the parents who still have the most control and influence on their children.

Why would a parent resist learning that their child's health and behaviour problems could sometimes be caused by environment? For exactly the same reasons many of us will fight tooth and nail to resist applying such knowledge to our own lives.

Many Children are Addicts

The strongest is addiction. The last thing most of us ever wanted to admit was that we had been addicts — that we were using food and drink and tobacco and medicines as *uppers* whenever we felt *down*. Addiction is such a strong force that it seems to over-ride all rational thinking. Clinical ecologists are now telling us that addictions are not a cure for disease — they are part of it.

Most people refuse to give up their addictions because *they know each fix makes them feel better*. The most successful ecology patients are the ones who have reached the stage where the addicts stopped working. They are the ones who have nothing to lose by trying other ways of feeling good.

What does this have to do with children? Some of our best addicts are children, and their parents taught them everything they know. Watch any mother deal with her children from minute to minute. She knows exactly what to feed them to pick them up. She can predict the times of day they will be cranky, or uncontrollable.

The fathers, unfortunately, are not generally as good at it. They get desperate too easily, and may compound the problem by feeding their child something the mother already knows will backfire. They will pass a child back to the mother for feeding when something goes wrong.

To suggest to an addicted *family* that there may be a problem inspires panic. You are threatening what is often their *only* means of control over their ills. Until we figure out how to make the changeover easy — to make *de-addicting* people less scary, there will always be resistance.

Even once a parent recognizes that his or her children have an ecology problem, there can be road-blocks to success. Sensitivities often run in families. If a child has problems, there is a good chance that he has a tired, harried mother and an irritable father. A child can't fight the problem alone. And if his parents have no energy for battle, a child can't win.

Nor can the parents fight alone. We are all dependent to some extent on acceptance by others around us. Many of us fear looking different. How many parents do you know of who are tired of having to bear the criticisms of friends and relatives who will not accept their judgment — judgment based on experiment and experience? We are always amazed at the people who prefer to live on out-dated opinions, rather than opening their eyes and just *watching* what happens to so many children after they have had a full plate of sugar-laden, colour-soaked dessert.

"Why Didn't You Tell Me?"

Overall, then, there are many reasons why help for children has been slow in coming. The bright side of the story is that many of these reasons are so tightly connected to each other, that removing one is like bumping a house of cards — some of the others fall at the same time.

It is fun to watch chain reactions. When parents solve their children's health problems with diet, they tell their doctor. Some of the doctors become enthused, and talk to the teachers. Some of the teachers get excited, and tell more parents. And so on. This is why we are talking about children in this issue. Please loan your copy around and get the chain started.

Speaking personally, there is one final thing that reminds us as parents just how important it is to keep our daughter healthy — whatever we may have to do to accomplish that. It

is that she is a *person*, like every one of us. She deserves to know what is affecting her as much as we do. She will grow up to be an adult, as we have. And we don't want to hear her

say, "If you knew all this, why didn't you tell me?"

Bruce and Barbara Small
Editors

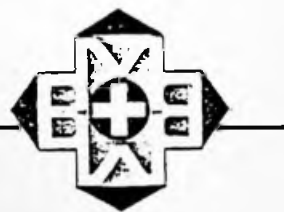
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1. H.E.F. Canada Annual Meeting — Ottawa, May 23, 1981

This year's annual meeting of the Foundation was held on May 23, 1981 in Ottawa, Ontario. The following are highlights taken from the minutes of the meeting.

President's Report

Ron Vince, outgoing President of the Human Ecology Foundation of Canada, opened the meeting with a number of remarks about the Foundation and its goals:

1. He felt there is an obvious need for the establishment of a more formal relationship and procedures between the Board of Directors and the Branches of the Foundation, and between the Board and the quarterly newsletter.
2. During the past year the membership has approximately doubled, and although this is very exhilarating, it presents certain problems with servicing the membership. The central body of the organization is responsible for the collection and dispersal of funds and therefore there may be a need for restructuring the cash-flow of the organization and for the accounting of these funds. It has become obvious to the Board that it will be necessary to make more funds available in order to continue with the publishing of the newsletter.
3. The main objectives of the Foundation are spelled out in the charter of the organization, and the original membership are all thoroughly knowledgeable in this respect. However, with the marked increase in new members who are not familiar with these objectives, the president felt that it might be of value to canvas the membership in order to determine what their specific needs are, so that the Foundation could proceed with servicing these needs.

Medical Director's Report

Dr. John MacIennan, medical director of the Foundation, reported that during the past year there has been a marked increase in both lay

and professional interest in the relationship of the environment to man's health. In the last fourteen months eight Ontario physicians, one laboratory director and five medical personnel have been trained in the basic techniques of diagnosis and management of Clinical Ecologic Disease. Following the basic instructional course, further teaching sessions were held throughout the fall, winter and spring.

The doctors who attended these courses include Dr. Donald Bastedo from Kitchener, Dr. John Blair of Guelph, Drs. Irvine Korman, Josef Krop, Marian Zazula and Ronald Filderman of Toronto, Dr. John Molot of Ottawa, Dr. Lynn Marshall of Arnprior, and Christine Radelescu, Ph.D., lab director, Toronto.

There appears to be an increased interest in the field of Clinical Ecology by the general allergist and the medical community. Several members of the Foundation have been engaged in fulfilling speaking and lecturing engagements in response to requests from the public. There is an increasing awareness in the population of the adverse effects which environmental influences are having on our everyday health.

Hamilton Branch Report

This report was presented by Walter Hammant in the absence of the president, Gladys Weaver. The Hamilton Branch is busily engaged in the final stages of publishing the Foundation's *Ecologic Cook-Book*. This Branch will also be actively involved in the forthcoming republication of the handbook *Common Sense for the Sensitive*.

Kitchener Branch Report

Shirley Mertens reported that four regular meetings and two larger general meetings were held throughout the year. The two general meetings were very well attended and stimulated a marked increase in the membership, which has increased approximately 200% over the past

year. Many new members are referred from the practices of Drs. Bastedo and Blair for counselling and assistance in the ecologic management of their medical problems.

The Branch maintains a stock of wild game and lamb for the use of the members who require these specific foods. The Kitchener newsletter provides the names and locations of numerous sources of clean foods. The Branch also maintains a comprehensive library of books dealing with Clinical Ecology and there is a large turnover of these books.

The Kitchener Branch also works in close co-operation with the Special Education Department of the Waterloo Board of Education and are currently engaged in a co-operative effort with the Brant Lung Association.

Ottawa Branch Report

Joyce Mulvihill reported that two general meetings and six executive meetings were held throughout the year. Four newsletters were published and these provided detailed information about the sources of clean food and water. Ongoing counselling was provided to the membership as needed.

Mrs. Mulvihill appeared in the Annual Seminar on Special Education at the Carleton Board of Education, as well as in two television interviews. Bruce and Barbara Small were interviewed on the Mike McManus show on Ottawa TV.

The Ottawa Branch is also well represented by several members in areas of public concern, namely, the adverse effects of urea formaldehyde foam insulation and the use of herbicide sprays on schoolgrounds and parklands.

The membership is increasing progressively and each new member is provided with a general information kit which details sources of food, wild game and general information regarding Clinical Ecology.

Toronto Branch Report

Bruce Small reported that only one general meeting had been held during the past year, due to lack of manpower to arrange major meetings. The Branch has instead concentrated on providing information to Foundation members in the form of the *HEF Canada Quarterly* and more recently by beginning to set up a computer data bank.

The data bank will list information needed by clinical ecologists and their patients, and will include not only medical references but up-to-date sources of food, clothing, building materials, and documented experiences that people have had with special items. It will provide solid back-up information and references for future dealings with any governmental agencies. In the early stages the information bank will be organized using computer equipment being acquired for business purposes by Mr. Small's consulting firm.

Although the data bank is being started as a Toronto Branch project, it is intended for the use of the entire Foundation, and will also be made accessible to other organizations including the Human Ecology Action League (HEF's American counterpart) and the Society for Clinical Ecology (the medical professional association of clinical ecologists).

It will be necessary to establish a firm relationship between the central HEF organization and branches of the Foundation regarding use of this computer service. It is also possible that sometime in the future small terminals or micro computers may be established in each Branch of the Foundation in order to provide input to and obtain output from the main computer.

Membership Fee Increase

After much discussion the members present voted to increase the HEF membership fee from \$10 per year to \$15. The primary reasons in favour were increased costs, particularly related to the production of the *HEF Canada Quarterly*.

Nominations

The members present unanimously carried a resolution to appoint three new directors who agreed to act for a three-year period. The new directors are Virginia Solares, Ph.D. and Neil Fitzpatrick, from the Ottawa area, and Mrs. Mary Campbell, from Toronto. In the directors' meeting that followed, Eric Gudgeon was elected President of the overall Foundation for a two-year term. The full executive and list of committee chairmen were decided at a subsequent meeting (August 22, 1981) and are given in the *Announcements* section of this issue.

Guest Speaker — Dr. Stuart Hill

Dr. Stuart Hill, Professor of Entomology at McDonald College, McGill University, addressed an audience of about fifty people on the subject of the effect that the environment can have on the health of man.

He stated that there may be a wider scope to the environmental influence of foods that is usually considered to be the case. The effects may include violence, war and general ill health. The degradation of the quality of our environment may be caused by pollution, over-population, overkill of renewable resources, and accelerated consumption of non-renewable resources.

The effects of these changes may result in the development of slums, unemployment, illiteracy, malnutrition, prejudice, war and the non-peaceful use of power. The effects on man are seldom lethal in nature, but frequently sub-lethal in the production of ecologic disease resulting from various physical and mental stresses leading to discomfort, chronic illness, fear, violence, and possibly revolution.

The accumulation of man's products and bi-products of pollution have direct and indirect harmful effects. The chronic illnesses of man do not attract sufficient attention to bring about resolution of these problems. There is only the dramatic effect of lethal responses which cause public concern.

Mankind is presented with the dilemma of having to make a decision of whether to produce quality foods without the use of pesticides, or to follow a system of crop and livestock production, which is based on profit, and not on the proper nourishment of man. It is a case of nourishment, fulfilment and sustainability of human quality as opposed to productivity, profit and power.

The social, economic, and political present day climate provide us with a very unstable international financial structure which indicates that we are living well beyond our means. It is necessary for us to distinguish between our needs and our wants and it is feared that the international financial structure may collapse because of the rising uncollectable world debt. Dr. Hill stressed the fact that we are not inseparable from the rest of the world, and that we must become more responsible to the rest of the world who have less than we have.

Environmental degradation is increasing progressively to the point where the world's deserts are growing faster than the green fields. The attempt to solve our soil problem has been to simply replace the soil deficiencies with various synthetic chemicals instead of building up the natural ingredients of the soil by means of composting and the addition of organic matter. The normal balance of the soil cannot be maintained because the trace nutrients which are being leached from the soil are not being replaced.

The same applies to our food supplies which are manufactured and processed — for example, highly processed white flour may have ten to twenty essential ingredients removed during the manufacturing process. When the flour is enriched according to the dictates of our federal government, only five or six elements may be added back to the flour with the remaining essential ingredients being lost to the consumer forever. This seriously affects the nutritional quality of our foods.

Dr. Hill stated that conventional agriculture is not really interested in the quality of life and that farm production represents only a small component of the food system. The most important part is involved in food processing. The proper food system is one in which the residual waste of consumption and production is recycled back into the productive phase. This complete circle insures the production of quality health sustaining food products.

Dr. Hill's comments on the control of pests indicated that the curative effect of chemical pesticides is of short term benefit to man at best, and that the adverse side effects, such as contamination of our water supply and the ambient air, are of considerably more significance. Short term solutions to agricultural problems very often generate more complex problems in the future.

He stated that there is a new bacterial or viral type of pesticide which is quite specific in its control of caterpillars, moths and butterflies. There is, however, a possible adverse

side effect in that the organism occasionally affects the health of other live organisms, such as pigs, which are very susceptible to virus infections.

Also, some pesticides promote the growth and spread of other pests because the natural control balance has been disturbed. Dr. Hill recommends the use of rotation of crops and organic pesticides such as Rotenone and building up of soil fertility in order to control pests.

Dr. Hill quoted a research project which was conducted at Rutgers University and which illustrates the adverse effect that chemical farming may have on the crops. Samples of a variety of spinach were grown in ten different states extending from New York to Colorado. The samples of spinach, when harvested, were all alike in appearance. The only variables in the experiment were the climate of the region and the soil in which the spinach was grown.

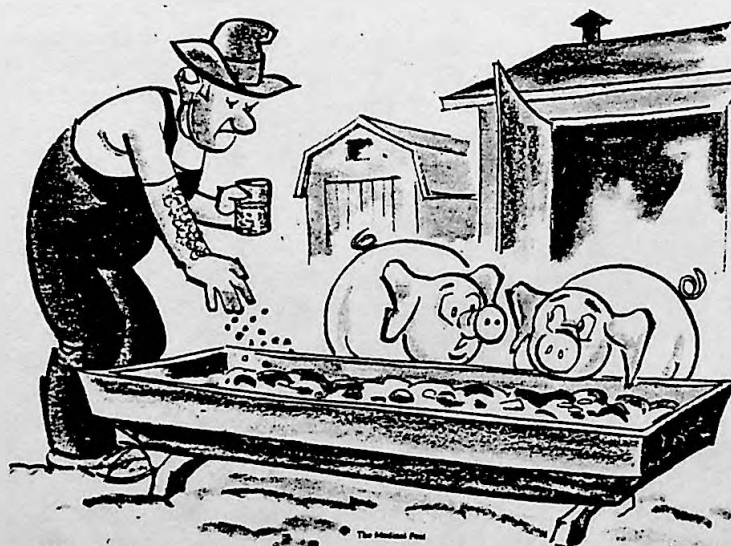
The samples were analyzed and it was found that the trace minerals which were contained in the vegetable varied in quantity from 1 part per

million to 1600 parts per million. This indicated that in some soils essential trace minerals and nutrients were practically non-existent.

Another experiment showed a marked increase in the fertility and germination rate of seeds which were produced in organic soil as opposed to soil which was treated with chemical fertilizers, herbicides and pesticides.

The Foundation is indebted to Dr. Hill for a stimulating and informative presentation. His work in the field of ecological agriculture is fundamental to the aims of HEF and is much appreciated.

Readers wishing a tape of Dr. Hill's presentation may order one from Mrs. Joyce Mulvihill, R.R.2, Woodlawn, Ontario, K0A 3M0. The cost is approximately \$3.00 plus handling charges. Those wishing more information on ecological agriculture are invited to write to Ecological Agriculture Project, P.O. Box 225, MacDonald Campus of McGill University, Ste. Anne de Bellevue, Quebec, Canada H9X 1C0.



Antibiotics again. I seriously question farmer Brown's medical qualifications.

The following article first appeared in the American Educator, Fall 1980, the quarterly journal of the American Federation of Teachers. It was written by Janice M. Hammond, a staff development consultant for the Wayne County Intermediate School District in Michigan, and a former elementary school teacher and counselor. We are grateful to the Feingold Association of the Washington D.C. Area for reprinting it and thereby bringing it to our attention.

We hope that readers can be encouraged by the fact that this kind of information has been reaching thousands of educators. It is very easy to forget what kind of stresses our children are being subjected to, and to be hard on those children who display behavioural and learning problems. Research is confirming over and over that many such cases are physically caused, and that the food our children eat may be responsible.

It is commonly accepted that when children are ill, their ability to learn is affected. It is easy to forget, however, that what they eat, or don't eat, may also affect their physical and emotional health and their ability to concentrate and learn.

Until recently, the relationship between diet and behaviour often was scoffed at by the general public and the medical profession. It was a connection, many believed, that was made only by "health food addicts", or vegetarians.

Articles such as "Diet and Schoolchildren" by Fred and Barbara Phlegar (*Phi Delta Kappan*, September 1979), as well as studies that indicate that what youngsters eat may affect their behaviour, however, are beginning to lend credence and respectability to the idea.

Hunger, food allergies, hypoglycemia, vitamin deficiencies, too much junk food and sugar, and reactions to

additives and preservatives may all stimulate or aggravate school behaviour and learning problems. William G. Crook, a pediatrician in Jackson, Tennessee, estimates that 50 to 75 per cent of the population has food allergies, which may cause recurrent colds, hyperactivity, fatigue, persistent hives, a stuffy nose, headaches, abdominal pains, muscle aches, and bedwetting.

In a five-year study of 182 hyperactive children, Crook found that 75 per cent were allergic to milk, corn, chocolate, eggs, or wheat — items that either caused or complicated their hyperactivity. Crook cited reactions to sugar as the number one cause of hyperactivity, followed by reactions to food colouring, especially red dye.

Doris Rapp, an allergist in Buffalo, New York, agrees. She found that 70 per cent of a group of twenty-four hyperactive children were allergic to milk, eggs, wheat, corn, sugar, cocoa, or food colouring.

Based on the experiences of these experts and others, it would seem to make perfect sense to try to remove certain foods from the diets of hyperactive children. Why is this idea not used more often?

One reason is that parents and educators are unaware of the possibility that food allergies are related to behaviour. Another is that doctors, unfortunately, receive more training in the use of drugs than in the use of nutrition.

An estimated 2.5 million hyperactive children in the United States are treated with amphetamines. Side effects for children from these drugs can include insomnia, psychological dependence, loss of appetite and weight, slow growth, zombie-like behaviour, and rapid mood swings when the drug begins to wear off.

An alternative to prescribing drugs for hyperactive children has been suggested by Ben Feingold, a Los Angeles allergist and pediatrician. In his book *Why is Your Child Hyperactive?*, Feingold lists common symptoms of the estimated four to five million hyperkinetic and learning

disabled children in the United States. He believes that many hyperkinetic and learning disabled children suffer adverse reactions that are triggered by chemicals contained in synthetic flavourings and colourings.

Symptoms to Watch For

Among the symptoms Feingold describes are:

- Fidgety behaviour — the child rocks, jiggles his legs, dances, or wiggles his hands. Infants will rock their cribs or bang their heads against the crib.

- Compulsive behaviour and aggression — the child is disruptive at home and school, compulsively touches everything and everybody, and cannot be diverted from an activity.

- Excitability — the child's behaviour is unpredictable; he or she panics easily, talks excessively, or has temper tantrums when frustrated.

- Low tolerance for failure — the child insists that his demands must be met immediately and cries often and easily.

- Short attention span — the child flits from one project to another and is unable to sit through a school period, a meal, or a television program.

- Exceptional clumsiness — the child has poor muscle or hand-eye coordination and has difficulty buttoning clothes, writing or drawing.

- Poor sleep habits — the child has difficulty getting to sleep and awakens easily.

Feingold recommends a diet that excludes all foods and drugs that are artificially dyed or flavoured, some preservatives, and those fruits and vegetables containing natural salicylates (tomatoes, oranges, apples, berries, grapes, and others). Feingold estimates that 60 per cent of hyperactive children can be helped by this diet.

Most recently, Dr. James W. Swanson (*Science*, March 1980), a psychologist on leave from the Hospital for Sick Children in Toronto, studied the behavioural effects of food dye on forty children, half of

whom were hyperactive. He found that learning errors increased significantly for seventeen of the twenty hyperactive children who received food dye capsules. Swanson concluded that some hyperactive children reacted to food dye "as if [the dyes] were toxic drugs."

We need to be aware, however, that even if a child's behaviour begins to improve with diet, it will take additional time to correct self-image and behaviour problems that stem from years of holding a reputation as the "bad kid".

What Educators Can Do

Teachers are in a special position to observe behaviour problems in children and to suggest ideas or approaches that can be taken by the child's parents:

- Suggest additional sleep, eating breakfast, a new diet, and testing for allergies and hypoglycemia.
- Help educate other teachers, administrators, and parents to possible nutritional causes of behaviour

problems. This could be accomplished through inservice programs, parent-teacher meetings, or informal conversations.

- Acknowledge that a student's behaviour problems are not always the result of poor parenting. Do not heap guilt and responsibility on the already frustrated parent.

- Do not use sweets to reward good behaviour. Aside from contributing to tooth decay, these rewards may also teach children that candy is a positive food.

- Avoid selling candy for fundraising ventures. Consider other alternatives, such as car washes or the sale of fruit, holiday cards, nuts, and popcorn.

- If there are vending machines in your school, consider eliminating the junk food (those with artificial colours, preservatives, and sugars) or closing down the machine until after the last lunch period.

- Set aside one day a week in the school cafeteria for a hot lunch that is free of additives or artificial

colourings. (Houston Independent School District has banned all certified colours and flavours in school lunches.)

- Assign classrooms the task of planning nutritional lunches.

- Turn your students on to good nutrition. Have them check ingredients on packages for sugar, additives, colouration, white flour, etc. Let the students prepare healthy treats.

- Try to be patient with aggressive behaviour in hyperactive children. Realize that the child's behaviour may be beyond his or her control.

- If the parent tries a new diet for the child, provide requested information on the child's school behaviour. Make the child feel comfortable when classmates bring food that he or she cannot eat.

Obviously, diet is not the magic answer to controlling all classroom discipline problems. But diet is a component that is often overlooked, and suggesting a switch to "natural" foods for a while can do little harm.



News Brief - Hyperactive Children Get Special Airline Menu

(Toronto Star, October 17, 1980) Canadian Pacific Airlines has introduced a special menu for hyperactive children, following the Feingold diet plan. The foods contain no preservatives, artificial flavours or artificial colouring.

Every so often we run across an article that brings a point home in a way you can never forget. The following story, written by Dr. William L. Traxel of Missouri, appeared in the August 1981 issue of the newsletter of the Feingold Association of the Washington D.C. Area. Our thanks to Dr. Traxel for speaking out and to the Feingold Association for printing his story.

It illustrates two things: 1) Food colouring can be hazardous for some children. It looks innocent, but it can cause big problems; 2) Many doctors must be almost totally unaware of the possible harm it can cause. We get a very helpless feeling when we see the kind of damage and suffering that is being inflicted on children through their food.

We hope this story will touch those who are especially capable of doing something about the problem: the parents themselves, and the physicians who should be able to recognize the dangers. After the helpless feeling comes anger, and after anger, action. Children are our most prized resource — let's not deplete them as we have done to so many other things in this world.

I am an ophthalmologist practicing in Poplar Bluff, Missouri. The problem began in August. My younger son, Ben (age 10) had developed pruritis, or itching, of his scalp. We were consuming large quantities of powdered lemonade and had discovered an orange flavoured concentrate which made a summertime refreshing drink we all enjoyed.

Ben's itching scalp was not readily explained. We looked at it carefully and thought perhaps he had dandruff or seborrhea, but saw none. We treated him with dandruff shampoo anyway. It didn't help. We thought perhaps it was caused by insect bites, but could find no insects or bites. We fumigated the basement

anyway. It didn't help. We considered incomplete rinsing after shampooing and swimming pool chlorine as causative agents, but these were soon ruled out.

School began and Ben began getting hives. His disposition, which had been belligerent, demanding and prone to loud outbursts of temper tantrums, took a turn for the worse.

I discussed his urticaria with our pediatrician. He laughed and stated that we hardly ever find the cause for urticaria, and brought to me an article in the pediatric literature to prove his point.

Ben's urticaria was getting worse. He had what is also termed "angioneurotic edema". We wondered if he truly was neurotic. My wife had returned to teaching English in a junior college three mornings a week. We considered that his symptoms, which now included nonspecific joint, muscle and tendon aching and tenderness, might reflect a desire to keep her home. That seemed most unlikely, however, as her teaching hours coincided with his school hours.

Because of rather continuous foot and leg pains, we took him to see a podiatrist. His feet were flat and inserts were ordered. By the time they came, his feet were swelling and most days he could not wear the inserts or even lace his shoes properly. His left Achilles tendon was especially tender and painful, and his calf and leg muscles and tendons were intermittently tender and painful as were his shoulders.

His wrists and hands were also involved. Some days he could not write due to swollen, painful fingers. His joints were never red or hot, however, and the tendonitis-myositis-arthritis was quickly migratory and worsening.

Hallowe'en was a particularly bad day. He came home from his school Hallowe'en party (where red punch was served) terribly distraught, yelling, throwing books, and slamming doors. Louie (son, age 12) was having a Hallowe'en party at home that evening which we were all working on and which Ben had been

looking forward to. Ben couldn't find his Hallowe'en false face and was so distraught that he was physically ill.

I found him on his bed sobbing. He had hives, his head itched, his leg hurt, his foot hurt and was swollen, and he was irrational and irritable. As the party progressed, Ben attempted the one-legged race but ended up lying on the driveway crying and hurting, presumably injured but due to only a very minor accident. The evening ended with his sitting on my lap, physically ill.

What was wrong? I considered the various collagen or rheumatoid diseases, but frankly he did not fit the picture. We considered a blanket in his bedroom, a blue one. I was allergic to a particular blue shirt and a particular gold blanket. We removed his blanket. His symptoms continued. I considered the orange drink we had all been consuming since summer and forbade him to drink it.

We consulted our pediatrician again. He agreed that Ben's reaction appeared allergic and his other symptoms resembled "serum sickness", an allergic drug reaction; but allergic to what?

Ben was not taking any medication. Routine lab studies were normal and a battery of expensive tests for allergy was not revealing. Ben was placed on Clortrimeton, an antihistamine tablet with a bright yellow coating. When he did not improve, we switched to Periactin, which made him a zombie, and to Tagamet, which seemed to help for one day, but then he was worse again.

By Thanksgiving he had the chicken pox. Thank God for the chicken pox. Ben did not eat for three days and his joints and muscles and itching and abdominal pains which by then he had begun having, got much, much better. So then we knew; it was food allergy. Again the orange drink came to mind and it was strictly eliminated.

By the Sunday after Thanksgiving he had been eating again and his old symptoms returned. In distress, I figured it was not the orange drink and let him have a glass. Wham! In

three hours he was his worst. Severe urticaria, severe stomach pain and the muscle, tendon, and joint pain and tenderness which was now involving his neck muscles, making breathing difficult and painful.

He was writhing and crying in pain after supper and slept with us in our downstairs bedroom that night, as he had frequently been doing when he felt particularly bad. With Ben crying in bed that evening, we knew we *had* to find out his problem. It was worsening constantly and now I considered it life threatening.

He could not eat normally; his weight had dropped. He could not attend school normally; his grades had dropped. He could not play on a Park League basketball team as he had done the two previous seasons, as his legs and feet were constantly painful. Several evenings I even had to carry him to bed and to the bathroom.

It was obvious to me that the orange drink he had consumed that day had precipitated his violent reaction. We began reading labels. The orange drink contained yellow dyes

No. 5 and 6. We then read the labels on the powdered lemonade which stated "artificial colour". I thought then I understood the problem.

My thought was premature, but at least we were on the right track. On December 13, 1980 a fortuitous phone call from a previous neighbour who owned a health food store was received. The subject of Ben was brought up and he said he would save me his last copy of Dr. Feingold's book on food additives and hyperactivity. I read it with haste.

One problem we had was in explaining Ben's problem to friends. We were usually greeted with expressions of disbelief that I had diagnosed the true problem or simply disbelief that the problem was truly a problem. It was easy for them to ignore or deny the situation. Family was more sympathetic.

We took Ben to an allergist in a nearby city after Christmas. I explained the problem to him and that we had him on the Feingold diet. He grimaced and stated it was not scientific and that he "knew all about" tamrazine sensitivity. ("It is not an

allergy.") His dietary program for Ben included margarine, Rice Krispies and several salicylates. Fortunately, the information from the Feingold Association arrived in January and we were gradually more successful in controlling his reaction.

When did the syndrome start? We recognized it in August 1980, but in retrospect must wonder if it did not begin long before that.

Ben was extremely active in contrast to his brother. His personality was volatile and impulsive. He had little regard for danger and was accident prone. In the first grade he was near the top of his class. His class standing gradually deteriorated to the middle by the fourth and now the fifth grade. His report card criticized his walking around the room and constant chatter.

In beginning Ben's diet, we noted a sudden and decided difference in his behaviour. His belligerence and tantrum fits became rare. He got along much better with his brother. He became a very pleasant, co-operative child.

It has not been easy. It never should have occurred.



News Brief — Hyperactivity Can Occur in Adults Too

(Wall Street Journal, October 20, 1980) Recent findings indicate that hyperactivity often continues into adulthood. There is not any known cure and the condition sometimes subsides in adults just as it does in children. Adult victims typically are afflicted with aggression, chronic impulsiveness, periodic violent temper, inability to concentrate, poor self-image and a distorted view of the world. It has been estimated that one in every twenty adults may have the condition.

LEARNING DISABILITIES -- *Can Polluted Air Affect our Children?*

HUMAN ECOLOGY FOUNDATION (CANADA) QUARTERLY V. 4 NO. 2/3 SPR/SUM 1981 PAGE 11

In the *Fall 1979* and *Summer 1980* issues of the Quarterly we reprinted briefs and presentations prepared by the Toronto Branch of the Human Ecology Foundation to the Ontario Ministry of Education, concerning learning disabilities related to food and chemical sensitivities. In this article we will mention several new items that may be of interest to those who are faced with the problem of educating children with this kind of problem.

We have been encouraged by the growing interest in this area that has been shown by a number of school boards, principals and teachers. Many of the HEF Branches as well as individual members have been active in providing information to school boards in their local area.

Auto Body Shop Next to a School

At a recent meeting of the Business Administration Committee of the City of Toronto Board of Education, we were pleased to see that pollution has become a popular topic of discussion.

In one agenda item, the committee considered a letter by Keith Baird, Trustee for the Toronto Board of Education from Ward 8. Trustee Baird is opposing a new City of Toronto By-Law which would allow a service station to be built immediately adjacent to the Morse Street Public School.

The by-law would allow the present applicant and any subsequent owner to engage in the business of auto body repair, yet it sets no standards to protect nearby residents and school pupils from toxic, corrosive, or irritating substances used in such an operation. Trustee Baird has told the Ontario Municipal Board that the health dangers of auto body abrasives, chemicals and paints are recognized by the Health and Safety Centre of the Ontario Federation of Labour and by the Ontario Ministry of Labour.

The Morse Street Home and School Executive also objected to the by-law and indicated in a letter to Trustee Baird that they had not been

aware of the proposed rezoning until he had brought it to their attention. They pointed out the potential health hazards to the children through pollution, increased traffic, and noise. The school is in an area of the city that is already suffering from lead emissions from a nearby Canada Metals Plant, and from chemical and aromatic waste from a Colgate Plant.

Housing Children in Toronto's Heaviest Pollution

In a second agenda item, the committee considered a proposed Official Plan Amendment that would allow "Mixed Industrial-Residential" areas in an already heavily-polluted section of the City of Toronto, only several blocks away from the Morse Street school. The committee had already come to the conclusion at an earlier meeting that housing in such areas would be too polluted to accommodate families with school-age children.

Further information in the form of the map following was presented at the October 8th meeting, and confirmed that the area in question was indeed situated within the *heaviest* industrial pollution of Metropolitan Toronto. The map has been taken from a City of Toronto Planning Board Report dated February 26, 1974.

We found this map interesting because it also confirmed in a very graphic way what we had suspected as a result of the experience of one of our HEF members. Notice that to the right of the 'star' indicating the rezoning area, there is another point marking the location of the house our member's family used to live in. It is just to the right of the "approximate sphere of influence" of several of the eastern Toronto pollution sources.

When our member's son was about six years old, he conducted a small experiment. The boy was accustomed to doing arithmetic exercises and he and his father enjoyed talking and learning together. His father decided at one point to begin an informal record of some of the

boy's work, along with his own observations about the smell of the air outside the house.

The examples following the Toronto map tell the rest of the story. When the wind was from the east, the boy's work was excellent, and his behaviour was relatively normal. When the wind was from the west, bringing strong smells from the pollution sources shown on the map, his ability to think and write declined dramatically. His mother's health varied the same way — with bad days when the wind was from the west, and better days when it came from the east.

The family has since moved out of Toronto, and after several moves has found a place far enough removed from industrial pollution to benefit the boy and his mother. He is now being schooled at home with the co-operation of the local school board, which supplies an "itinerant teacher" who comes several times a week.

Because the boy had become sensitive to a wide array of chemical exposures, his physician recommended that even the teacher should be careful to avoid wearing cosmetics, deodorants, hair spray, perfumes and scented fabric softeners. From what we understand, the principal and school board have been most co-operative and the routine is working out for the boy's benefit. Until it is possible to reduce his susceptibility to chemicals, a regular classroom environment is a hazard to him, and travel to and from school by bus would add severely to the overload on his system.

Schooling at Home

Many parents are surprised to hear that it is possible to school their children at home. In Ontario, the Education Act allows under section 20(2)b that "*a child is excused from attendance at school if he is receiving satisfactory instruction at home or elsewhere.*"

In a previous discussion with Dr. Gordon Bergman, director of Special Education for the Ontario Ministry

LEARNING DISABILITIES — Can Polluted Air Affect our Children? (continued)

HUMAN ECOLOGY FOUNDATION (CANADA) QUARTERLY V. 4 NO. 2/3 SPR/SUM 1981 PAGE 12

of Education, we were assured that this *is* in fact an option, particularly for children like the one in our example above, for whom the home environment may be the *only* environment in which the child can be well enough to learn at this stage. As in our story, the local school board is at liberty to work out virtually any kind of arrangement that will best suit the child. We have since heard of several other cases in which the student does most of his or her work at home, but is free to attend classes if they can tolerate the school environment for short periods.

Some of our readers may also be aware that Carolyn Small, daughter of your *Quarterly* editors, is also on a home schooling program. Again, we are able to report excellent co-operation with Ministry of Education officials, the local board, the principal and the Grade One teacher at the nearest public school. Readers and course instruction manuals were made available, and the program has so far been a success.

Carolyn still has her ups and downs, but she seems to be able to concentrate her learning in those times when she is feeling best. Avoiding the twice daily car trips has been a benefit, and we no longer see the 'hangover' effects that followed her return from kindergarten each day last year. An unexpected side benefit is that the whole family feels better off without the extra exposure to automobile exhaust and perfumes that she had often brought back on her clothes before. (We had decided not to send her on the school bus since that would have been an even heavier chemical load.)

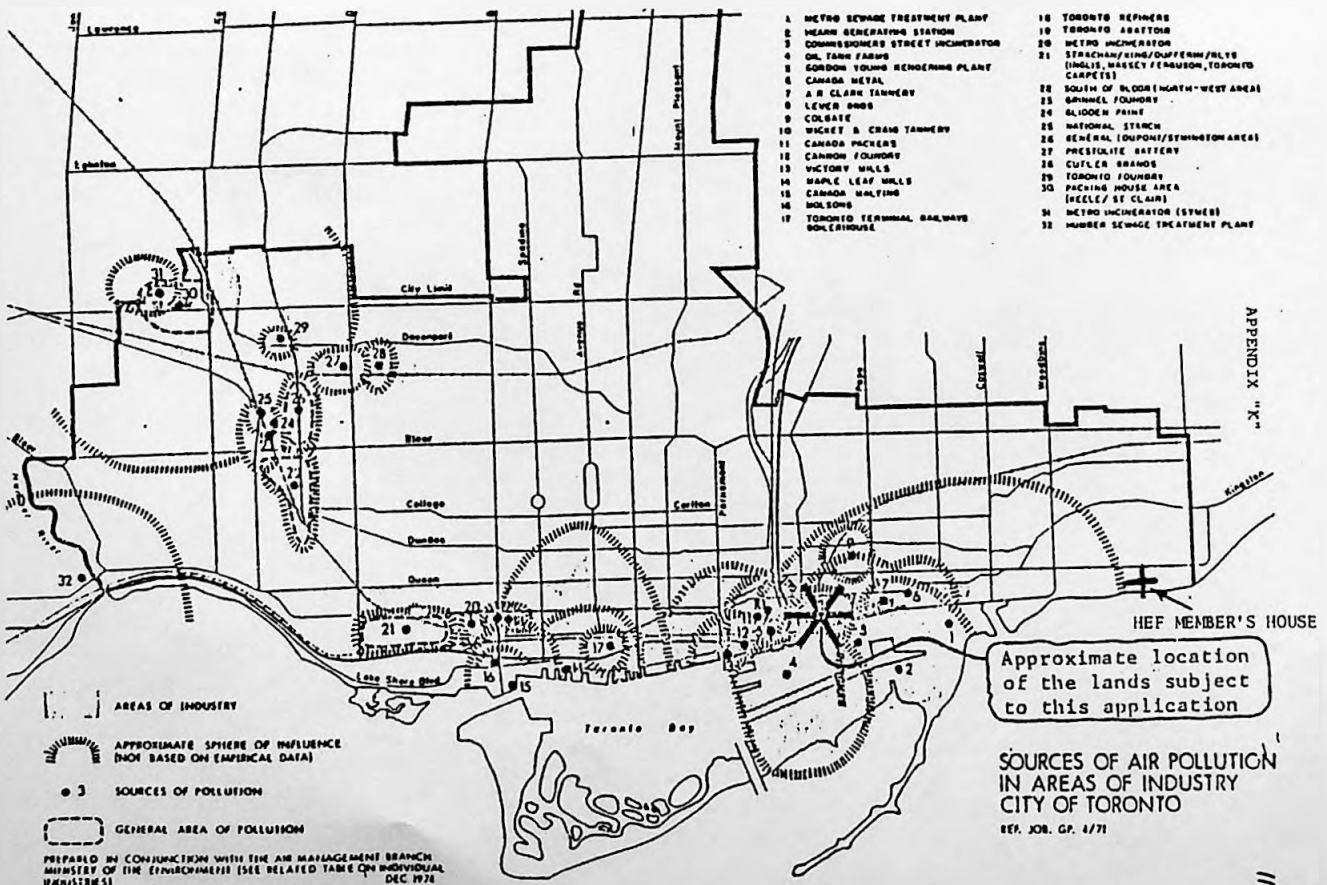
Certainly it would be better if we had cleaner schools, as we see many children who would probably benefit from cleaner air when they are trying to learn. And those who must learn at home have to work harder to find other children to play with. It is not an easy life for them.

But many of the children we talk about really do not have valid choices. They can attend school as it

stands, and be ill or unable to learn properly or unable to get along with other children. Or they can be kept for the time being under more carefully controlled conditions, where they will be able to function normally and learn at a natural healthy pace.

Some of the children who are badly affected by pollution at an early age must withdraw long enough to bolster their tolerance, for they must be able to survive heavy loads of pollution in later life. We feel it is a shame that so many children must squander their tolerance early by being exposed to unnecessary contaminants both inside the schools and in their food, water and air at home.

Readers wishing further information on schooling for environmentally sensitive children, or requiring material to send to their local school board are invited to write to the Quarterly office at R.R.1, Goodwood, Ontario, L0C 1A0, (Tel: (416)-294-3531), or to their local HEF Branch office.



LEARNING DISABILITIES — *Can Polluted Air Affect our Children?* (continued)

HUMAN ECOLOGY FOUNDATION (CANADA) QUARTERLY V. 4 NO. 2/3 SPR/SUM 1981 PAGE 13

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WEEK 3 TO 8 DECEMBER 1979
NO AIR POLLUTION

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EVENING NOV 10 DEC 1979
WEST WIND WITH VERY
STRONG AIR POLLUTION

1. H.E.L.P for Hyperactives

(Book review prepared by
Mary Nichols, Toronto)

Wanda Wilson of Toronto has recently published a fascinating book about children. The title of this little book, with a child's silhouette on the cover, is *H. E. L. P.* Inside we discover that the initials are part of a charming acrostic poem:

**Hyperactive Pre-Schoolers Can Be
Enjoyed
Loved and
Positively Nurtured**

With unbounded enthusiasm, Wanda Wilson proceeds to tell us how. Her great affection for and understanding of young children (even problem children!) is immediately apparent. This small book is packed with good ideas to help distraught parents and teachers. My first reaction upon reading it was, "Where were you when I needed you, Miss Wilson?"

Wanda Wilson is a specialist in Early Childhood Education and has held various positions in this field. She has taught night school classes at Humber College, and her publisher writes, "She has developed a general and in-depth progress report to be used in determining the pre-school child's developmental stages. A Development Activity Guide for Home Use was developed for parents so they could further assist their child at home. A Teacher Evaluation Guide was developed to be used by all early childhood education teachers in assessing their own work with children in their particular setting."

Early in her career Miss Wilson recognized the effect that food and environmental excitants were having on her unruly little charges, and decided to do something about it. Her first suggestion is to get a problem child off junk food and on a good nutritious diet. In fact, she recommends a Four Day Rotation Diet.

So far so good, but this is where I feel that Miss Wilson gets off track. She subscribes to the theory that it is

all right to eat a given food as often as you like in a day, as long as you don't eat it again for several days. I strongly disagree with this version of the Rotary Diversified Diet. (A sample menu shows eight servings of citrus being consumed at five meals or snacks on Day One.)

Miss Wilson talks about getting dust and plastic toys out of a child's room — especially if that's where he usually throws tantrums. The same applies to cosmetics in the bathroom, cleansers in the kitchen, and so on. She advises not to forget to note Junior's behaviour while using, and after using, magic markers, crayons, and glue.

"Tips for Survival" are extremely HELPful and come under headings such as *Gaining Your Child's Attention, Discipline, An Act of Love, Acknowledgment of Your Child's Feeling, Constructive Criticism, Tantrums, Verbal and Physical, and Educational Opportunities.*

If all else fails, which is unlikely, the author says treatment with medication has its place, but should be carefully monitored. And Wanda's own prescription: "Lots of Love."

A couple of excerpts from the text:

"Accept your child for what he is, where he is, and help him grow from there."

"Even though his hyperactive behaviour is difficult to handle, he is still a child. He has the same basic needs as those who do not have his problems. If anything, his needs may be greater than other children. He is a child first with some special needs and difficulties next."

I only wish I had been forearmed with this slim volume when my first child started turning over before we even got her home from the hospital!

H.E.L.P. was published in 1981 by St. Peter's Printing and Publishing Company Limited, 2395 Cawthra Rd., Unit 4, Mississauga, Ontario

L5A 9Z9. Softcover, 33 pages, \$3.95.

2. The Invisible Additives

(Book review prepared by
Mary Nichols, Toronto)

The Invisible Additives, Environmental Contaminants in Our Food is a real-life horror story — your life and mine. Linda R. Pim, author of *Additive Alert* has done it again. Ms. Pim has put together thousands of facts in a most informative, readable manner. She turns a good phrase, and her wit makes the depressing subject matter easier to take:

"Since these organic pollutants have almost impossible names they are usually abbreviated to form a less than tasty bowl of alphabet soup — PCBs, PBBs, PCP, TCDD, and so on."

There are lots of fascinating charts, and they are right with the text where they should be, not hiding in the back of the book.

Canadians will be happy (or unhappy!) to see so many Canadian statistics, but American readers will find this book equally helpful (and disturbing.) We are all in this mess together. As one expert so aptly put it, "Everything leaks".

Clinical ecology people, supposedly well versed on environmental contaminants, are in for some nasty surprises. *Invisible Additives* is a book you can't afford *not* to read. The author mentions ecological illness and acknowledges Dr. Theron Randolph's pioneering efforts in this field in the United States, and Dr. John MacLennan's work in Canada. Readers are also introduced to the Human Ecology Foundation of Canada.

At the end of each chapter dealing with additives there is a short "What You Can Do" section.

Canadian and U.S. Food Contaminant Laws are discussed, and there is an excellent chapter entitled

Alternatives to Pesticides: Ecological Agriculture.

A few random facts:

- Over 4 billion pounds of pesticides are manufactured world-wide each year.

- There are 16,000 pest control products registered in Canada.

- One American firm "fixed" toxicity tests to meet Canadian and American government standards.

- Strawberries, raspberries, blackberries and some other fruits may be sprayed one day before harvesting.

- Half of all pesticide residues are found in animal products.

- Exposure to even minute amounts of some pesticides can alter brain activity for a year or more and cause irritability, insomnia, loss of libido and ability to concentrate.

- One hundred percent of all Canadians tested have DDT, Heptachlor, epoxide, Dieldrin and PCBs in their systems.

- A third of all antibiotics sold in Canada are for livestock — disease prevention and growth.

- Honey can cause botulism in babies.

- Natural moulds are a very serious health hazard, especially aflatoxin, often found in peanuts, nuts and grains. Aflatoxin is also a potent carcinogen and causes birth defects.

- Last year Dioxin was found in some samples of 2,4D.

- TCDD is a Dioxin 500 times more poisonous than strychnine and 10,000 times more poisonous than cyanide.

- Thirty-four per cent of Ontario's sewer sludge is applied to farmland.

- Food was contaminated with PCB from paperboard containers made from recycled "carbonless" carbon paper.

- The more acidic a food, the more lead it will absorb from the solder seam of a tin can.

- Asbestos fibres from filters used in food processing can cause malignant tumours.

- Root crops collect pesticides in their outer tissue.

Linda Pim not only brings us the bad news, but offers many positive suggestions as to how we can best

deal with these accidental contaminants in our lives. She tells us, for example, that Health Departments will test mother's milk for toxic chemicals. (The service is free.) Then the mother and her doctor are in a better position to decide whether or not she should nurse her baby.

After reading this book you are going to be sadder but you also will be wiser. You owe it to yourself to be informed — unfortunately the problem is here to stay.

"The Invisible Additives" is a project of Pollution Probe and was published in 1981 by Doubleday of Canada Limited, Toronto, and Doubleday & Company, Inc., Garden City, New York. Hardcover \$17.95 CAN, paperback \$9.95 CAN. 280 pages. If not available at your local bookstore, copies may be obtained from Pollution Probe, University of Toronto, Toronto, Ontario M5S 1A1, for \$19 hardcover or \$10.50 paper, postpaid.

News Brief — Where Does Our Air Come From?

We have long wondered where the air here in Southern Ontario has been before it reached us. There have been some reports of long range transport of pollutants — hundreds and even thousands of miles, but we never knew for sure whether it was happening to us.

In the middle of August this year, a short note in the *Toronto Star* (August 14, 1981) about the hot sticky weather Ontario had been experiencing gave us a few clues. The weather director stated that we had been getting *Florida* air instead of *Texas* air, which we normally would get in that season.

The *Florida* air in August is very humid, and passes through major industrial areas before reaching Ontario. In other years, it was more common to get air from the southwest, around Texas, where it is usually drier. The forecaster that day predicted cleaner drier air by the end of the week, *from the Arctic*.

1. Birth Defects High in Holland Marsh Farming Area

(*Toronto Star*, June 18, 1981) A disturbing number of stillbirths and birth defects among children born to parents living or working in Ontario's rich Holland Marsh farming region during the 1970's has been reported to Ministry of Health officials. But the cause remains a mystery.

Health care researchers from the University of Toronto have discovered a puzzlingly high number of stillbirths and birth anomalies in the town of Bradford and the township of West Gwillimbury, in which Bradford is located, between 1973 and 1979.

The township of West Gwillimbury incorporates more of the marsh area than any of the neighbouring townships studied.

In Bradford in 1977, more than 7 per cent of babies were stillborn or had congenital abnormalities, compared with less than 2 per cent in other parts of the area between Newmarket and Barrie, north of Metro Toronto.

In studying more than 13,000 births in the region between 1973 and 1979, the researchers point to West Gwillimbury as repeatedly having a greater than normal number of birth problems. The research reports tentatively implicate excessive use of pesticides, herbicides and fungicides by local farmers.

In the four years from 1973 to 1977, the provincial average for stillbirths and birth defects remained

steady at 1.57 per cent. But Bradford's rate jumped dramatically from 0.89 per cent to 2.67 per cent in 1974, 4.07 per cent in 1975, and 7.08 per cent in 1977. Over the same period, the corresponding rates for Barrie also rose, from 0.61 per cent in 1973, to 1.42 per cent in 1974, 1.46 per cent in 1975, and 2.53 per cent in 1977. The regional average in the same period was only 1.79 per cent.

Among the defects reported in the study are spina bifida, Down's syndrome, cleft palate, and anencephaly.

2. Chemicals in the Workplace May Harm Children

(*Washington Post*, as reported in *Feingold Association Newsletter*, *Washington D.C.*, August 1981) The University of Southern California Medical School recently reported on a study which is first to show a relation between parents' occupation and brain tumours in children, according to Dr. Alan Leviton of Harvard, a specialist in childhood brain tumours.

Parents of children with brain tumours had three to ten times more exposure to chemicals at work than the parents of healthy children.

Brain tumours are the second leading cause of death among children after leukemia. the most striking finding of the study was that a very large number of the children with brain tumours had parents who work in the aircraft industry in Los Angeles.

3. Effect of Steroids on Learning in Children

(*from Medical World News*, February 2, 1981, as reported in the July 1981 newsletter of the Western New York Allergy and Ecology Association) Investigators at the National Jewish Hospital Asthma Center have found that severely asthmatic children did better on standard learning and memory tests as the effects of corticosteroid treatment wore off.

The study included 94 children aged from nine to eighteen years, who were receiving around the clock bronchodilator therapy alone or in combination with alternate-day steroid therapy. Half the children were on *theophylline* alone, and the other half took in addition *prednisone* every other day in varying doses.

Tests for visual memory of spatial configurations and learning of word pairs were given to all children, and were repeated at 8, 24, and 48 hours after steroid medication in that group. Dr. Hyman Chai said that the *theophylline* treated children scored mostly in the normal range. Those on the *prednisone* scored below average at the 8 and 24 hour tests, with scores reverting to normal just before their next steroid dose was due.

Dr. Chai warned that these studies are very preliminary, and further studies are already underway. There may be different factors influencing the learning performance of asthmatic children, but Dr. Chai and his colleagues are hoping that more research on the medication factor will help to remove at least one barrier in learning faced by asthmatic children.

ANNOUNCEMENTS

HUMAN ECOLOGY FOUNDATION (CANADA) QUARTERLY V. 4 NO. 2/3 SPR/SUM 1981 PAGE 17

1. National H.E.F. Executive

This year's Human Ecology Foundation of Canada Directors were confirmed at the annual meeting, held in Ottawa in May, 1981. Officers were elected at subsequent Board meetings, and the complete slate is as follows (listed alphabetically):

Leonard Beeson
Mary Campbell (Toronto)
Neil Fitzpatrick (Ottawa), *Vice-President*
Eric Gudgeon, *President*
Walter Hammant, *Treasurer*
Shirley Mertens (Kitchener)
Dr. Virginia Solaris
Ron Vince
Gladys Weaver (Hamilton)

The Board appointed five of its members to act as an executive committee: *Eric Gudgeon, Neil Fitzpatrick, Walter Hammant, Ron Vince, and Gladys Weaver.*

Several other major committees were struck. Mrs. Mary Campbell will chair a *Publicity and Education Committee*, and Miss Gladys Weaver will chair a *Membership Committee*. Mr. Wilfrid Bean will chair a special *Fund Raising Committee*. The Executive Committee will act as a Finance Committee.

All correspondence to the head office of the Foundation and any of the committees can be directed to: *The Human Ecology Foundation of Canada, Head Office, P.O. Box 8601, Dundas, Ontario, L9H 5G1.*

2. Clinical Ecology Information Bank Now Possible

In the *Winter 1981* issue we announced that a special information bank was being planned, to organize all the bits and pieces of knowledge in clinical ecology and related fields. It will be designed to serve both the doctors and the patients, and will include practical everyday information such as up-to-date organic food sources and addresses for products,

as well as scientific papers dealing with the medical aspects of ecological illness.

We are pleased to announce this time that with the backing of several health-minded friends and HEF members, your editors have acquired some powerful computer equipment for *Sunnyhill*. Computer time can now be made available for the use of the Foundation in order to get the information bank started. Several interested members will be meeting in mid-November to plot out a course for the information bank, and we welcome suggestions from all members as to how it should operate and what kind of information you would like it to make available.

The project has received over \$1300 in donations in memory of Jeffrey Gordon Collum, who died suddenly in an automobile accident this summer (*see 'In Memoriam' in the PERSONAL section of this issue*). We are indebted to Jeff's parents, Helen and Howard Collum, for thinking of the Foundation and its work.

This project is one of the most ambitious that HEF has yet undertaken, and will require a great deal of support in its early stages of development. Further donations and volunteer help will be most welcome.

3. Alexander G. Schauss — Special Lecture

Alexander P. Schauss, the author of *Diet, Crime, and Delinquency* (Parker House, 1981), will deliver a special public lecture on November 11th, 1981 at 8:15 p.m. in the Theatre of the Arts, University of Waterloo. Schauss's book was reviewed in the *Summer 1980* issue of the HEF Canada Quarterly.

Schauss, an internationally known speaker and director of the American Institute for Biosocial Research in Tacoma, Washington, will be in town for a series of workshops entitled "Body Chemistry and Behaviour". The workshops are presented by Human Resources Development Associates and hosted by the Halton

Hills Centre in Milton, Ontario, November 6 to 8 and November 9 to 11, 1981.

Readers wishing to attend the workshops should contact: *Halton Hills Center, Number 25 Highway, R.R. #3, Milton, Ontario L9T 2X7*. Telephone numbers are as follows: *Toronto — (416)-482-1749, Kitchener — (519)-745-6541, Milton — (416)-878-8983*. The \$175 workshop fee includes everything except accommodation, which is \$25 per night. A complete agenda is available from Halton Hills Centre.

We have taken the liberty of reproducing below an article that appeared in the Los Angeles Times, Sunday, April 26, 1981, and which was brought to our attention by the Clinical Ecology Association of Southern California. The article describes a talk given by Alexander Schauss to about 150 teachers and law enforcement officers in Low Angeles County, California.

Nutrition, Behaviour Link Studied

What made this 15-year old boy turn bad? An audience of county educators and law enforcement officers sat in the darkened Los Angeles County Hall of Administration hearing room and watched the filmed drama of a teenager Jekyll and Hyde.

The film showed the polite, cooperative teenager taking a written test as technicians chatted with him. But minutes after he had ingested a substance, the youth turned into a hyperactive, foul-talking hoodlum. He could not complete the test; he was fidgety and aggressive.

Was dope the cause of this alarming change of behaviour? "No," said Alexander Schauss, "it was an ordinary orange — something the teenager never knew he was allergic to."

Schauss, director of the Institute of Biosocial Research in Tacoma, Washington, said many children are allergic to otherwise good, nutritional foods. But because their allergies have never been determined, he said, the children become branded as delinquents.

Schauss spoke to about 150 teachers and law enforcement officers on the relation of food to antisocial behaviour. The session was sponsored by the office of the Los Angeles County superintendent of schools.

The message emerging from Schauss' talk and the films he showed was that considerable delinquent behaviour stems from allergic reactions to good foods or from eating too many non-nutritional "junk foods".

"...Foods can have an adverse effect on the way individuals behave, sometimes causing a complete metamorphosis of their personality," Schauss said. He stated further that from his studies of diets of some young people who become law breakers, he has found the youths to have serious nutritional imbalances. The nutritional imbalances can trigger anti-social behaviour.

Schauss, who has written a book on nutrition and criminality (*Diet, Crime and Delinquency*) made no specific recommendations, but he made clear that he abhors the sugar-heavy, additive-dosed and vitamin-short snack and fast foods favoured by many school children.

"We're extremely naive about the things in our food, the way they affect us, how they relate to brain

chemistry and hence our behaviour," Schauss said.

Schauss, who is not a doctor, said that scholarly medical journals have generally shunned the subject of how nutrition affects behaviour. Since allergies can trigger anti-social actions in young people, he urged the audience to be alert for children who are "biochemically sensitive" to certain foods.

4. Clean Places to Live Still Needed

In our *Winter 1981* issue we announced that a number of our members are in desperate need of ecological housing anywhere in southern Ontario. The need is still there, and we will probably remind our readers in every issue to come, because there are always new members with the same needs too. If anyone knows of any suitable homes, apartments, or rooms (for rent or for sale), please contact Mrs. Mary Campbell in Toronto at (416)-924-2014. Places should be relatively free of indoor and outdoor chemical contamination, and preferably as mould-free as possible as well.

5. Healthy Horizons Newsletter

Human Ecology Foundation (Toronto) is presently exchanging newsletters with another Canadian health group known as Healthy Horizons. One of their recent issues describes the group's purpose as follows:

"Healthy Horizons Association motivates the individual to take action in healthful living, to assume his/her personal responsibility for the well-being of body, mind and spirit: 1) to make greater use of what is already known in the field of nutrition; 2) to listen for new ideas and encourage and foster a new awareness to dangerous chemicals present in the food chain; 3) to host conferences and sponsor speakers knowledgeable in the healing arts, though nutrition and all other mediums."

The Healthy Horizons newspaper is available at \$5.00 for year for subscription and membership. Those who are interested may write to: *Healthy Horizons, c/o Mrs. Iona McConnell, 332 Betts Avenue, Yorkton, Saskatchewan S3N 1N2.*

Good Luck H.E.F. Canada

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1. Jeffrey Gordon Collum — In Memoriam

In the latter part of July we received news that Jeffrey Gordon Collum, 19, son of Helen and Howard Collum of Willowdale, Ontario, had been killed suddenly in an automobile accident on Highway 400. Jeff was a patient of Dr. Carolyn Dean and Dr. William Van Hoozenhuize, and had been undergoing intensive treatment for environmental allergies.

Jeff was working during the summer as assistant manager of a restaurant at Canada's Wonderland, and was enrolled to start courses in the Faculty of Man-Environment Studies at Waterloo University in September. Despite allergic problems he was an artistic and highly creative young man. This summer Jeff and his family were in the early stages of realizing just how much their lives had been affected by ecological illness.

Mr. and Mrs. Collum decided that expressions of sympathy would be most appreciated in the form of donations to the Toronto Branch of the Human Ecology Foundation of Canada, to help develop our new computerized information bank project and thereby make more information about ecological illness available to others. This project will be a tangible reflection of the positive energy the Collum family hopes can come out of such a tragic accident.

We extend our sincere sympathy to Jeff's parents, and to his brother Philip and sister Melanie, and we thank them and their many friends who have contributed in Jeff's memory.

To date the information bank fund has received over \$1300.00 in donations in memory of Jeffrey Collum. We feel this will ensure a sound basis for the project. Anyone wishing to add further donations should send his contribution to Human Ecology Foundation (Toronto), R.R.1, Goodwood, Ontario L0C 1A0,

or telephone (416)-294-3531.

We might also suggest that the Collum family has set a forthright precedent that might be considered by others in the Foundation in the event of a death in the family. The Human Ecology Foundation of Canada is a registered charitable foundation and receipts will be issued for all donations, for tax purposes.

2. An Ecological Holiday Apartment in Hawaii

Mrs. Marna Slocum has advised us that she has an ecological apartment for rent in Hawaii, with attractive monthly rates, clean surroundings, and access to a clinical ecologist. She writes as follows:

Because of so many requests for an ecologically safe place for visitors to live and the need for another place for me to be able to use, I set out to find an area where the air was pure and dry. I found a 14 month old, as yet un-sprayed building with an apartment above the twelfth floor, on the ocean, and with good ventilation.

I tried it out for two weeks after having it cleaned from top to bottom and after the successful stay purchased it. I then decorated it, furnished it, and am maintaining it ecologically. Although this apartment will not work for everyone, I feel most chemically sensitive people will find it a very healthy, comfortable, and delightful place to live. To me it is the healthiest area on the island of Oahu and one of the most beautiful.

For full particulars, readers are invited to write to: Marna Slocum, 7704 Kalohelani Place, Honolulu, Hawaii, USA 96825, or telephone (808)-395-4633.

3. Good Health Naturally — A Statement by Andrew T. Fisher

Andrew T. Fisher is an HEF member from Illinois, USA who has kindly provided what we feel is an excellent statement on masked food and chemical sensitivity. We would welcome other readers to send in similar contributions on the subject of their choice. Andrew writes as follows:

Most mental and physical diseases presently perplexing medical doctors and psychiatrists as incurable have masked allergic reactions as their root causes. The field of clinical ecology is a unique individualized approach to identifying and eliminating these causes. We may end up with masked allergic reactions to the least expected yet most common foods and chemicals in our everyday environment.

Such sensitivities are cleverly hidden by the fact that we are "hooked" on our commonly consumed input. Just as our illness symptoms — be it headache, drowsiness, or depression — strike, our very next "fix" of our sensitizing substance — be it an egg, hamburger, coffee, tea, candy bar, or cigarette — appears to "cure" our problems temporarily.

Clinical Ecologists get around this masking by first fasting us for at least four days to completely flush out our internal digestive systems with water from all foreign food or chemical contaminants. After that, any food or chemical to which we are sensitive will directly bring on a convincing reaction.

We may completely contain and control our own problem by avoiding in our personal environment all the foods and chemicals we are sensitive to. By diversifying and rotating our diet on a four day basis, we may keep food sensitivities from building up in the future. This program usually involves a new way of looking at and relating to our environment as well as a major change in life style.

Why hasn't the majority of our huge medical profession discovered and implemented this direct approach to handling so many presently

poorly understood mental and physical diseases?

Huge industries, namely food, drug, and chemicals, have a profit motive in selling us and our doctors on quick, simple, general remedy approaches. For us they advocate popping pills, minimum daily vitamin formulas and quick instant foods for instant gratification. For our doctors they advocate drugs to prescribe for us as quick general solutions (never mind the more permanent long lasting side effects).

For more positive information on Clinical Ecology, I highly recommend: *An Alternative Approach to Allergies* by Theron G. Randolph, M.D., and Ralph W. Moss, Ph.D. (Harper and Rowe, New York, 1980).

4. Ecological Sewing Service

I will sew clothing, household articles, stuffed toys, etc. Only natural fibres are used, 100% cotton preferred. Reasonable rates. Contact Brenda Koski in Scarborough, Ontario at (416)-438-0853.

5. Items for Sale

1. One room air cleaner by Five Seasons, Model 500A, used intermittently for only three months. In excellent condition. Price \$125.00 or best offer. Call (416)-852-3763.
2. One gross of McCartney Bottles — 1/2 oz. clear glass bottles with metal caps. Never been used. 1980 price, total \$42.84. Call (416)-852-3763.

News Brief — *When you were little did you have tubes in your ears too?*

(Reprinted from the April 1981 Issue of the Newsletter of the Feingold Association of the Greater Washington D.C. Area) "One day recently my five year old asked "Mommy when you were little did you have tubes in your ears?" I said no. And then we proceeded to talk about all her friends who had tubes in their ears. As she talked I began to realize that with few exceptions the only children that we knew who had not had frequent ear infections were my own children and their two friends who are also a Feingold family."

(The Feingold Association's June/July 1981 Issue followed this note up with a reprint from the Washington Post, May 27, 1981, by Susan Okie:) Ear infections, a misery that afflicts more than 70 percent of American children under 3 years old, have taken on new and troubling significance. Doctors believe the fluid left behind by infections may affect speech development and intelligence by interfering with hearing at the age when children learn to talk. There were 30 million visits to doctors' offices for such infections (in the United States) last year, at an estimated total annual cost of \$2 billion — counting doctors' fees, antibiotics and various kinds of surgery.

Because of concern about fluid in the ear, operations to insert tiny tubes in toddlers' eardrums have almost doubled in a decade, and now rival or surpass tonsillectomies as one of the operations most often done on children. As many as 1 million American children have tubes placed in their ears each year to drain the fluid and restore normal hearing, according to one expert who based his estimate on sales data from tube manufacturers.

Despite the commonness of ear infections, there are surprising gaps in medical understanding of their causes and implications. Some children have earaches month after month in their early years. Others have none. No one is sure whether the difference reflects genetics, skull structure, allergies, or impaired defenses against bacteria. (The Feingold editor notes that "Feingold" parents generally report a dramatic improvement in children who used to be troubled with ear infections.)

COMICS



"Whenever I'm in those weeds it starts raining in my eyes."



"Your pulse is very, very weak!"



PUBLICATION AND MEMBERSHIP ORDER FORM

HUMAN ECOLOGY FOUNDATION (CANADA) QUARTERLY V. 4 NO. 2/3 SPR/SUM 1981 PAGE 22

publications available	price	total		
A Sublingual Method of Testing (<i>Quarterly, Summer 1978</i>)	\$ 1.00	_____	Indoor Air Pollution - What Can People Be Sensitive To? (<i>Quarterly, Winter 1979</i>)	1.50 _____
Arthritis and Food Allergy (<i>Quarterly, Fall 1978</i>)	1.00	_____	Insulation — The Formaldehyde Nightmare (<i>Quarterly, Winter 1980</i>)	1.00 _____
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